## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H93018

MOON ELECTRONICS, INC.

(0)

Principal Place of Business	Mailing Address				
256 SW 74TH AVE	4258 SW 74TH AVE				
HAMI FL 33155	MIAMI FL 33155-4405				

FILED
May 07 1997 8:00am
Secretary of State



**************************************	<del>*</del>								
						3. Date Incorporated or Qualified 12/31/1985	3a. Date of Last Report 08/12/1996		
<del></del>	ace of Business	├ <b>─</b> ŋ			4. FEI Number			plied For	
21	H -1-	Suite, Apt #, etc.			- <del></del>	59-2622380			t Applicable
Suite, Apt.	#, etc.	<u>├</u> -┐				5. Certificate of Status Desired		58.75 / Fee Re	Additional
City & State	3	City & State				C. Etablica Compaign Signature			
23		28				Election Campaign Financing     Trust Fund Contribution	$\Box$	\$5.00 Added	
Zip	Country	Zip	Cp	untry	,	8. This corporation has liability for i	intangible tax		
24	25	29	30	·	•		Yes 🔽		. 100.002.,
	9. Name and Address of Curren	t Registered Agent				10. Name and Address of New Re	gistered Age	ent	
	ez, Joseph a			81	Name				
	I SW 55TH AVE, #B			82	Street Add	dress (P.O. Box Number is Not Acceptable	/o)		
MIA	MI FL 33143			-	Ollect Add	TOS (I .O DON YAMING I STAGE PICE PICE)			
				83					
				84	City			200	Code
4.4	•			İ	' '	•			
11. Pursuant I	to the provisions of Sections 607.050 egistered agent, or both, in the State	2 and 607 1508, Florida Statu of Florida, Such change was	ites, the a	above ed by	e-named cor	poration submits this statement for the pation's board of directors. I hereby accept	urpose of chot the appoin	anging it	s registered registered
agent. I a	m familiar with, and accept the obliga	ations of Section 607.0505, F	lorida Sta	ntutes	3	and a control of the	544,011	43	. 20:0:00
SIGNATURE									
	Signature, typed or printed name of registered age OFFICERS AN		Register		ent signature root	uirad when reinstatieg)	DATE CERC AND D	וסבמזמי	00 101 00
12. TITLE	PS OFFICERS AN	DELETE		Title		ADDITIONS/CHANGES TO OFFIC		Change	Additio
NAME	PEREZ, JOSEPH A			NAME				) Onlingo	[_] //00/110
STREET ADDRESS	7641 SW 55TH AVENUE, #B				ADDRESS				
CITY-ST-ZIP	MIAMI FL 33143			DITY - S					
TITLE	VI	DELETE		IMLE	11-21		···	Change	Additio
NAME	PEREZ, LOURDES M			NAME		•			
STREET ADDRESS	7641 SW 55TH AVE, #B				ADDHESS				
CITY-ST-ZIP	MIAMI FL 33143				S1 - ZiP				
TITLE		DELETE		HTLE				Change	Additio
NAME			3.2	NAME				-	•
STREET ADDRESS			1		ADDRESS				
CITY-ST-ZIP					S1 · ZIP				
TITLE		DELFTE		litte				Change	Additio
NAME			4. ?	NAME					
STREET ADDRESS			4.3	STREET	ADDRESS				
CITY-ST-ZIP			4.4	CHY- 5	S1 - ZIP				
TITLE		DELETE	5.1	TOLE				Change	Addilio
NAME			5.2	NAME	1				
STREET ADDRESS			5.3	STREET	I ADDRESS				
CITY-ST-ZIP			5.4	CITY - 5	31 - ZIP				
TITLE		☐ DELETE	6.1	IIItE				Change	Additio
rame			62	NAME					
STREET ADDRESS			6.3	STREET	AODRESS				
CITY-ST-ZIP			64	CITY- S	ST - ZIP				

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that if am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CIGNATURE.

Treed 0 Pull 29/9-